



City of Port St. Lucie Building Department
 121 SW Port St. Lucie Blvd
 Port St. Lucie, FL 34984
 772-871-5132 • Web Site: <http://www.cityofpsl.com>
 To Schedule Inspections <http://pandapublicweb.cityofpsl.com>

Insulation Permit

Construction under this permit will be done in accordance with the FBC 6th Edition (2017)

PERMIT # _____ PIN # _____

PROPERTY ADDRESS				
LEGAL DESCR	SECTION	BLOCK	LOT	Parcel ID#
OWNER		MAIL ADDRESS		ZIP
PHONE CELL				
CONTRACTOR		MAIL ADDRESS		ZIP
STATE LIC. # PSL COMP #				
CONTRACTOR E-mail Address		PHONE		FAX #
CELL				
ARCHITECT/ENGINEER		MAIL ADDRESS		PHONE
LIC # E-MAIL ADDRESS				
Commercial: <input type="checkbox"/> Residential: <input type="checkbox"/>				
Type of Insulation: <input type="checkbox"/> Loose Fill <input type="checkbox"/> Batten <input type="checkbox"/> Spray Foam <input type="checkbox"/> Foam board				
Location: <input type="checkbox"/> Ceiling <input type="checkbox"/> Walls <input type="checkbox"/> Other *please specify: _____				
R-Value of Ceiling: _____				
R-Value of Wall: _____				
Valuation: \$	Applied Date:	Rec'd By:	Reviewed by/Date	PERMIT FEE:
<p>THIS PERMIT BECOMES NULL AND VOID IF CONSTRUCTION OR WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.</p> <p>Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc.</p> <p>OWNER'S AFFIDAVIT: I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating to construction and zoning.</p> <p>WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.</p> <p>IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.</p>				
Signature of Contractor _____		Signature of Owner (Only if Owner-Builder) _____		
Date _____		Date _____		
Print Name _____		Print Name _____		
NOTARY PUBLIC, State of Florida		[NOTARIAL SEAL]		
State of Florida				
County of _____				
The foregoing instrument was acknowledged before me by means of ___ physical presence or ___ online notarization this ___ day of _____, 20____, by _____ who is personally known to me or has produced _____ as identification.				

MUST BE COMPLETELY FILLED OUT

Form Created 08/29/2011 updated 01/17/20 YP

Payment Method: _____ Last 4 or Check #: _____ Receipt #: _____